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A Pilot Study to Determine the Adequacy of Dental Education in Preparing Dentists to Manage Dental Anxiety in Patients with Developmental Disabilities Maura Lynch¹, Lynn Tepper^{1*}, Steven Chussid¹, Renuka Bijoor¹

Faculty Mentor* Columbia University College of Dental Medicine, New York, NY

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INTRODUCTION

- One in four adults in the U.S. have disabilities that challenge them on a daily basis.
- Recently, accreditation requirements have been modified to include "more robust training" in the care of intellectually and developmentally disabled patients.
- The aim of this pilot study was to determine if the adequacy of special needs dental education has had an impact on providers' professional behavior, practice characteristics, attitudes, and confidence when treating these patients and managing their dental anxiety.
- The study addressed the importance of preparing dentists to treat this population in an effort to improve dental education in this area.

HYPOTHESIS

Figure 2: Percent of Respondents Who Replied "Yes" to Utilizing the **Following Treatment Modalities When Treating Their Special Needs Patients**

RESULTS



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We hypothesize that the adequacy of dental education will have a significant impact on dentists' knowledge, attitudes, beliefs, and confidence about treating those with developmental disabilities and managing their dental anxiety.

METHODS & MATERIAL

• Questionnaire Development

Step 1:

• Questionnaire Distribution: A non-randomized, noninterventional, anonymous, Qualtrics survey was administered prospectively to members of one local and one national organization. The sample included a variety of dental specialties.

Data Analysis using Qualtrics & Excel

Figure 1: Percent of Sample Representing The Following Dental **Specialties**





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Table 1: Respondents' Attitudes & Behaviors Towards Treating **Special Needs Patients**

Statements about Treating Special Needs Patients	Average Response (0 = Not Applicable; 1 = Strongly Disagree; 2 = Disagree; 3 = Agree; 4 = Strongly Agree)
I feel comfortable prescribing oral sedation for special needs patients.	1.65
I feel comfortable using physical restraints on special needs patients.	1.68
Financial compensation for treating special needs patients is adequate.	2.01
My dental education prepared me well for treating special needs patients.	2.42
I have seen an increase in the number of special needs patients over the years in my practice.	2.61
My staff is knowledgeable in treating special needs patients.	2.67
My practice is set up for the treatment of special needs patients.	2.67
I am concerned about legalities when treating special needs patients.	2.72
My staff is comfortable treating special needs patients.	2.82
I like to treat special needs patients.	2.90
I am confident treating special needs patients.	2.92
I would like to learn more about treating special needs patients.	2.92
I am concerned about the safety of special needs patients.	3.22



CONCLUSION

- Of the 107 respondents, 89% reported that they do treat special needs patients.
- In regard to treating this population, 74% reported confidence, 87% expressed concern for patient safety, and 82% want to learn more.
- Level of specific expertise had the strongest influence on a provider's decision to treat or not to treat special needs patients.
- Reimbursement level had the least influence on their decision to treat.
- Information from continuing education courses had the least influence on their decision not to treat.
- The adequacy of dental education has a significant impact on dentists' knowledge, attitudes, beliefs, and confidence about treating those with developmental disabilities and managing their dental anxiety.
 - Receiving post-doctoral education better prepared them for managing patients with special needs rather than dental school training, with pediatric dentists reporting the highest rate of preparation.
 - There is an imperative need to improve both pre-doctoral and post-doctoral education in this area as education has a significant influence on preparing dentists to treat this population.

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